



Camp Somerset "Extended Camp" Application Form

Please fill out one form per child. The information provided in this application will be used for internal administrative purposes and will not be used as criteria for acceptance. Tuition is due with application. Mail or drop off to Wonders at 4607 Willard Avenue, Chevy Chase, MD 20815.

Today's Date _____

Child Information

Last Name _____ First Name _____

Nickname _____ Birth Date _____

Current School & Grade _____ Male Female

Parent/Guardian Information

Parent/Guardian One

Last Name _____ First Name _____

Street Address _____

City, State, Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____ E-mail _____

Parent/Guardian Two

Last Name _____ First Name _____

Street Address _____

City, State, Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____ E-mail _____

Before camp runs from 7:30-9:00am and After Camp from 3:00-6:00pm
Check-off desired session and indicate extended camp choice:

<input type="checkbox"/> Jun 18-29	<input type="checkbox"/> July 2-13	<input type="checkbox"/> July 16-27	<input type="checkbox"/> July 30-Aug 3
<input type="checkbox"/> Before Camp	<input type="checkbox"/> Before Camp	<input type="checkbox"/> Before Camp	<input type="checkbox"/> Before Camp
<input type="checkbox"/> After Camp	<input type="checkbox"/> After Camp	<input type="checkbox"/> After Camp	<input type="checkbox"/> After Camp
<input type="checkbox"/> Both Before & After Camp	<input type="checkbox"/> Both Before & After Camp	<input type="checkbox"/> Both Before & After Camp	<input type="checkbox"/> Both Before & After Camp
<input type="checkbox"/> Drop-In	<input type="checkbox"/> Drop-In	<input type="checkbox"/> Drop-In	<input type="checkbox"/> Drop-In

Tuition due with application:

Before camp	\$113 per session for both weeks \$57 per session for just one week
After camp	\$247 per session for both weeks \$124 per session for just one week
Drop-In*	\$21 per Before Camp \$36 per After Camp
*Note: Drop-in fees are due at time of drop-in	

Office Use Only

Tuition \$ _____ Total \$ _____ Check # _____ Date Rec'd _____ 1 _____ 2 _____ 3 _____